

**FOREST CITY MUNICIPAL UTILITIES  
REBATE APPLICATION**

**SETBACK THERMOSTAT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

1) Date of Purchase: \_\_\_\_\_

2) Date of Installation: \_\_\_\_\_

4) Retailer: \_\_\_\_\_

5) Product Description: \_\_\_\_\_

**ORIGINAL RECEIPT MUST ACCOMPANY APPLICATION**

**A \$10.00 rebate is allowed for the purchase and installation of a setback thermostat. Limit of one rebate per household.**

Signature of Applicant: \_\_\_\_\_

Approved:

Disapproved:

\_\_\_\_\_  
Electric Superintendent

\_\_\_\_\_  
Date

For Office Use Only

Date Rebate Issued \_\_\_\_\_

Date Chamber Reimbursed \_\_\_\_\_